

PTO/SB/92 (09-03)

Approved for use through 11/30/2005. OMB 0851-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/723,326
	Filing Date	November 28, 2000
	First Named Inventor	WEBSTER
	Art Unit	1636
	Examiner Name	MCKELVEY, TERRY ALAN
	Attorney Docket Number	8002-1

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

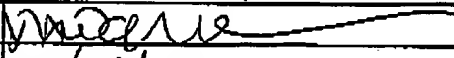
<input checked="" type="checkbox"/> Firm or Individual Name	STANLEY A. KIM, PH.D., ESQ.			
Address	RUDEN, McCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.			
Address	222 LAKEVIEW VENUE, SUITE #800			
City	WEST PALM BEACH	State	FLORIDA	Zip 33401-6112
Country	U.S.A.			
Telephone	(561) 838-4500	Fax	(561) 514-3412	

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Keith A. Webster Ph.D.		
Signature			
Date	04/26/04	Telephone	305 243 6779

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	09/723,326
Filing Date	November 28, 2000
First Named Inventor	WEBSTER
Title	MOLECULAR SWITCH FOR REGULATIN
Art Unit	1636
Examiner Name	MCKELVEY, TERRY ALAN
Attorney Docket Number	8002-1

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
STANLEY A. KIM, Ph.D., ESQ.	42,730
AMY A. OSTROM, Ph.D.	52,088
JORDAN NEWMARK, ESQ.	50,094
ROBERT M. SCHWARTZ, ESQ.	29,854

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	STANLEY A. KIM, Ph.D., ESQ.		
Address	RUDEN, McCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.		
Address	222 LAKEVIEW VENUE, SUITE #800		
City	WEST PALM BEACH	State	FLORIDA
Country	U.S.A.	Zip	33401-6112
Telephone	(561) 838-4500	Fax	(561) 514-3412

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE OF Applicant or Assignee of Record

Name	Keith A. Webster Ph.D.		
Signature	<i>[Handwritten Signature]</i>		
Date	04/26/04	Telephone	305 243 6779

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.